02-21-02

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			Docket Number	21212C					
u.		FILING BY "EXP	RESS MAIL" UNDER	37 CFR 1.10					
		ET327548575US	,	F bruary 19, 2002					
		Express Mail Lab I Number		Date of Deposit					
9/02									
		itted herewith for filing under 37 tion No. 09/577,799, filed May 2	7 CFR §1.53(b		11046 U				
	Applicar	t (or identifier): RYALS ET AL.							
	Title:		N CASCADE LI	I INVOLVED IN THE SIGNAL EADING TO SYSTEMIC ACQU	IRED				
	Enclose	d are:							
The state of the s	1. \(\times \) 2. \(\times \) 3. \(\times \) 4. \(\times \) 5. \(\times \)	Specification Drawings - 11 sheets Oath or Declaration – Copy from Application Data Sheet Nucleotide and/or Amino Acid Sa. Request to use Computer b. Specification Sequence L i. CD-ROM or CD-R (2 ii. paper	Sequence Submi r Readable Forn isting on: copies)	ission n (CRF) from parent application	I				
	6.	c. Statement Verifying Identic Preliminary Amendment Assignment Papers (Cover She English Translation of Information Disclosure Stateme Certified Copy of Priority Documentum Receipt Postcard Fee Transmittal Form (PTO/SB/Two month Extension of Time receipt Card Payment Form	eet & Document(ent nent(s) /17)	s))					

Before calculating the filing fee, please enter the enclosed Preliminary Amendment.

Filing fee calculation:

Date: February 19, 2002

Basic Filing Fee										
Multiple Dependent Claim Fee (\$ 280) Foreign Language Surcharge (\$ 130)										
For Number Number Rate										
Extra Claims	Total Claims	15	-20		x	\$	18	=	\$	
	Independent Claims	1	-3		х	\$	80	=	\$	
					TC	TAL	FILING	FEE	\$	740

- Please charge Applicant's Credit Card in the amount of \$740. A Credit Card Payment Form is enclosed for fee purposes.
- The Commissioner is hereby authorized to charge any additional fees under 37 CFR § 1.16 and § 1.17 which may be required in connection with this application, or credit any overpayment, to Deposit Account No. 50-1744 in the name of Syngenta Biotechnology, Inc.

Please address all correspondence to the address associated with Customer No. 022847.

Please direct all telephone calls to the undersigned at the number given below, and all telefaxes to (919) 541-8614.

Respectfully submitted,

J. Timothy Meigs

Attorney for Applicants

Reg. No. 38,241

Tel. No. (919) 541-8587

PTO/SB/17 (11-01)
Approved for use through 10/31/2002. OMB 0651-0032
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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$) 400.00

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Complete if Known						
Application Number	09/577,799					
Filing Date	May 24, 2000					
First Named Inventor	Ryals					
Examiner Name	Kubelik, A					
Group Art Unit	1638					
Attorney Docket No.	PB/5-21212B					

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)								
Check C Credit card Money Other None	3. ADDITIONAL FEES								
Deposit Account:	Large	Entity							
Deposit	Fee Code	Fee (\$)	Fee Cod	Fee le (\$)	Fee Description	Fee Paid			
Account Number	105	130	205	65	Surcharge - late filing fee or oath				
Deposit	l	50	227	25	Surcharge - late provisional filing fee or				
Account Name	127	50	221	20	cover sheet				
The Commissioner is authorized to: (check all that apply)	139	130	139	130	Non-English specification	ļ			
Charge fee(s) indicated below Credit any overpayments	147	2,520	147	2,520	For filing a request for ex parte reexamination				
Charge any additional fee(s) during the pendency of this application	112	920*	112	920°	Requesting publication of SIR prior to				
Charge fee(s) indicated below, except for the filing fee to the above identified deposit account.	l		l		Examiner action	 			
FEE CALCULATION	113	1,840*	1113	1,840*	Requesting publication of SIR after Examiner action	 			
1. BASIC FILING FEE	115	110	215	55	Extension for reply within first month	400.00			
Large Entity Small Entity	116	400	216	200	Extension for reply within second month	700.00			
Fee Fee Fee Fee Description	117	920	217	460	Extension for reply within third month	 			
Code (\$) Code (\$) ree Faid	118	1,440	218	720	Extension for reply within fourth month	 			
106 330 206 165 Design filing fee	128	1,960	228	980	Extension for reply within fifth month	L			
107 510 207 255 Plant filing fee	119	320	219	160	Notice of Appeal	ļ			
108 740 208 370 Reissue filing fee	120	320	220	160	Filing a brief in support of an appeal	 			
114 160 214 80 Provisional filing fee	121	280	221	140	Request for oral hearing	 			
SUBTOTAL (1) (\$)	138	1,510	l	1,510	Petition to institute a public use proceeding	 			
	140	110	240	55	Petition to revive - unavoidable	 			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1	1,280	241	640	Petition to revive - unintentional				
Extra Claims below Fee Paid	1	1,280	242	640	Utility issue fee (or reissue)	<u> </u>			
Total Claims 20** = X = X	143	460	243	230	Design issue fee Plant issue fee				
Claims Multiple Dependent	144 122	620 130	244 122	310 130	Petitions to the Commissioner				
Mulliple Department	123	50	123	50	Processing fee under 37 CFR 1.17(q)				
Large Entity Small Entity	126	180	126	180	Submission of Information Disclosure Stmt				
Fee Fee Fee Fee Description Code (\$) Code (\$)	581	40	581	40	Recording each patent assignment per				
103 18 203 9 Claims in excess of 20	301	40	301	40	property (times number of properties)				
102 84 202 42 Independent claims in excess of 3	146	740	246	370	Filing a submission after final rejection]]			
104 280 204 140 Multiple dependent claim, if not paid		740	249	370	(37 CFR § 1.129(a)) For each additional invention to be				
109 84 209 42 ** Reissue independent claims over original patent	149	740	249	3/0	examined (37 CFR § 1.129(b))	 			
110 18 210 9 ** Reissue claims in excess of 20	179	740	279	370	Request for Continued Examination (RCE)	<u> </u>			
and over original patent	169	900	169	900	Request for expedited examination of a design application	<u> </u>			
SUBTOTAL (2) (\$)	Other fee (specify)								
**or number previously paid, if greater, For Reissues, see above	*Red	uced by	Basi	ic Filing	Fee Paid SUBTOTAL (3) (\$\\(^{\(^{\)}\)}\)	.00			

SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	J. Timothy Meigs	Registration No. (Attorney/Agent)	38,241	Telephone	919-541-8587
Signature	1. Timothey Mery			Date	2/19/2002

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO 2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.